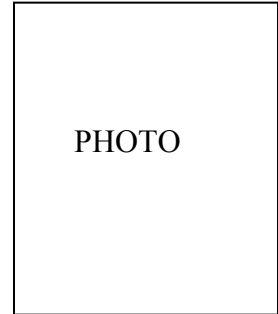


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St. PETER'S UNIVERSITY
St. Peter's Institute of Distance Education
 Chennai-600 054.

END ASSESSMENT, NOVEMBER/DECEMBER 2011
 (Batch: 2009)

EXAMINATION APPLICATION FORM



Programme : **M.Sc. (Information Technology)**
 (Semester)

Code No. : **422**

Code Number of Student Support Centre:

1. Name in BLOCK LETTERS : _____
 (as in the certificate in English)

2. Gender : Male/Female

3. Date of Birth : _____

4. Nationality : _____

5. Community : BC / MBC / SC / ST / OC

6. Father's Name : _____

7. Mother's Name : _____

8. Blood Group : _____

9. (a) Present Address with pin code : _____
 (in BLOCK LETTERS)

PIN: _____

(b) Permanent Address with pin code : _____
 (in BLOCK LETTERS)

_____ PIN: _____

(c) Residential Telephone No. : _____ Mobile No. _____

(d) E-mail : _____

10. Particulars of Educational qualification:

| Qualifications | Board/College/ University | Month and year of passing | Reg. No. | Average marks /Class |
|----------------|------------------------------|------------------------------|----------|----------------------|
| | | | | |

Note: Copies of the certificates and Transfer Certificate are to be enclosed.

11. (a) No. of papers in the End Assessment :

| | Theory | Practical |
|-------------------------------|--------|-----------|
| All the Papers in IV semester | | |
| Arrear papers in III Semester | | |
| Arrear papers in II Semester | | |
| Arrear papers in I Semester | | |

(b) Total amount of Assessment Fee :

| | |
|------------------------|-----|
| IV Semester* | Rs. |
| III Semester (Arrear)* | Rs. |
| II Semester (Arrear)* | Rs. |
| I Semester (Arrear)* | Rs. |
| Total | Rs. |

12. Details of Fees paid for End Assessment* : Amount: Rs DD No.
 (DD in favour of 'St. Peter's University'
 payable at Chennai is to be enclosed) Date of Payment:..... Bank and Place.....

13. Whether II year Tuition fee is paid: Yes / No

14. I certify that all the above particulars given by me are correct.

Date:

Signature of the Student

Signature of the Director
 St. Peter's Institute of Distance Education
 (With Seal)

Signature of the Coordinator
 (With Seal)

Note: The filled-in application is to be submitted to the Controller of Examination through Director,
 St. Peter's Institute of Distance Education on or before 15.11.2011

| S.No. | Particulars of Fee * | Name of the Programme |
|-------|-------------------------|-----------------------|
| | | PG (Rs.) |
| 1. | Cost of Application | 25 |
| 2. | Statement of Marks | 25 |
| 3. | Theory (Per Subject) | 150 |
| 4. | Practical (Per Subject) | 175 |
| 5. | Project | 400 |